

## Missouri Ethics Commission (MEC)

PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use:	55
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## **Statement of Committee Organization**

1.	Statement Information JUNE 1, 2014		
Type: New Amended (if amending, enter MEC ID C141374 & section changed  2. Committee Information Friends for Jennifer Florida			hanged )
	Name of Committee 3873 Hartford Street, St. Louis, MO 63116		,314,229-8904
	Committee Mailing Address, City, State & 7to	St. Louis City	(
	Committee Type: Campaign Candidate Continuing	County Clerk or Board of Election Commiss  (PAC) Debt Service Exp	
3.	Treasurer/Deputy Treasurer Information Sharon Oatis		
	Treasurer's Name (First & Last) 3729 Oak Hill, St. Louis, MO 63116	Treasurer's Email Address (optional) 314 960-1393	
	Treasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telephone Number	Treasurer's Work Telephone Number
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional	()
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number
4 Additional Committee Information			
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Add	dress, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address,	City, State, & Zip
r-	CANDIDATES: Do you have more than one candidate committee	? Yes (refer to instructions on	back) 🖸 No
5.			
Ь.	Candidate Supported or Opposed (candidate committees must Jennifer Florida, 3873 Hartford, STL, MO 63116	(314) 229-8904	()
m	Name & Mailing Address, City, State & Zip of Candidate  April 7, 2015  Arch 3  President of Bd. of Al	Telephone Number (Candidate Committees Democrat	JEWNIFER FLORIDA
	Election Date 59 Office Sought & Political Subdivision	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees	must complete this section)	
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
3.	Signature(s) Check certification(s) & sign (required by all com	mittees)	
	I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Cb. 575 RSMo.		
9	Marian Committee Treasurer	Canadidate (Candidate Committees Only)	Horda

MO 300-1308 Packet (Rev. 07/2013) Form must be completed in full & contain original signature(s), fax filings are not eccepted ommission of 3

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